Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($)	**120.00**

Complete if Known

Application Number	09/745,215
Filing Date	December 21, 2000
First Named Inventor	John William Richardson
Examiner Name	Gregory B. Sefcheck
Art Unit	2662
Attorney Docket No.	PU000157

METHOD OF PAYMENT *(check all that apply)*

☐ Check   ☐ Credit card   ☐ Money Order   ☐ None   ☐ Other (please identify): _____

Customer Number 24498

☒ Deposit Account: Deposit Account Number 07-0832   Deposit Account Name: THOMSON LICENSING INC.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	Small Entity Fee ($)	SEARCH FEES Fee ($)	Small Entity Fee ($)	EXAMINATION FEES Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ - 20 or HP =	_____ x	_____ =	_____

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims

Fee ($)	Fee Paid ($)

Independent Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ - 3 or HP =	_____ x	_____ =	_____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 =	_____ / 50 =	_____ (round up to a whole number) x	_____	= _____

4. OTHER FEE(S)
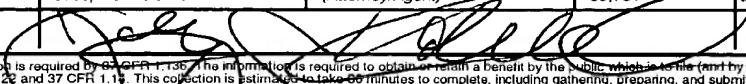
Non-English Specification, $130 fee (no small entity discount)

Other (e.g., late filing surcharge): **FEE FOR ONE-MONTH EXTENSION OF TIME**

Fees Paid ($)

$120.00

SUBMITTED BY

Name (Print/Type)	Joseph J. Kolodka	Registration No. (Attorney/Agent)	39,731	Telephone	(609) 734-6816
Signature	*(signature)*				April 12, 2005